AFFIDAVIT

STATE OF MASSACHUSETTS)	
COUNTY OF Bristel) ss.:	
I, Andrew W. LoRabelle being (Print Full Name) I am employed by Philip Morris Inco On 10/21. 1997 I purchased the cigarettes in the quantities indicated from at 175 Dean St., Teach within the (Street Address of Retailer) cost of \$ 16.76.	orporated as a
Marlboro Brand Style (Check for each Purchased)	Quantity of Packs Purchased (Complete for each Purchased)
Marlboro Long Size (Box) Marlboro King Size (SP) Marlboro King Size (25/pack) Marlboro 100 (SP) Marlboro 100 (Box) Marlboro Menthol King Size (SP) Marlboro Menthol King Size (Box) Marlboro Medium King Size (SP) Marlboro Medium King Size (Box) Marlboro Medium 100 (SP) Marlboro Medium 100 (SP) Marlboro Lights King Size (SP) Marlboro Lights King Size (SP) Marlboro Lights King Size (Box) Marlboro Lights 100 (SP) Marlboro Lights Menthol King Size (SP) Marlboro Lights Menthol King Size (Box) Marlboro Lights Menthol King Size (Box) Marlboro Lights Menthol King Size (Box) Marlboro Lights Menthol King Size (SP) Marlboro Lights Menthol King Size (SP) Marlboro Lights Menthol 100 (SP)	
Marlboro Lights Menthol 100 (Box)	

I submit this Affida	avit for the benefit of the State of Massachusetts with the
	l be relied upon to determine whether Philip Morris
	d with the Massachusetts Regulation, "Cigarette and
Smokeless Tobacco Produ	icts: Reports of Added Constituents and Nicotine Ratings".
10/22/97	Cofinelle
Date	Signature